

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Attorney Docket No. 20720-95585
Examiner Robert M. Joynes
Art Unit 1615

RECEIVED

JAN 16 2003

OFFICE OF PETITIONS

Box RCE
Commissioner for Patents
P.O. Box 2327
Arlington, Virginia 22202

REQUEST FOR CONTINUED EXAMINATION

Sir:

This is a request for continued examination under 37 C.F.R. § 1.114 of pending prior Application No. 08/962,027 (Confirmation No.), filed on October 31, 1997 (CPA filed January 16, 1999 and January 30, 2001) for INTERMEDIATE RELEASE NICOTINIC ACID COMPOSITIONS FOR TREATING HYPERLIPIDEMIA.

1. ☐ Please enter the Amendment Pursuant to 37 C.F.R. § 1.116 filed on in Application No. .
2. ☐ Please consider the arguments in the Appeal Brief or Reply Brief filed on in Application No. .
3. ☒ A Preliminary Amendment is enclosed.
4. ☐ Affidavit(s)/Declaration(s) is/are enclosed.
5. ☐ A Supplemental Information Disclosure Statement is enclosed.

In accordance with 37 C.F.R. § 1.97(b)(4), submission of this Statement requires no fee. However, if for any reason a fee is due, the Director is hereby authorized to charge payment of any fees required in connection with this Supplemental Information Disclosure Statement to Deposit Account No. 500-2543 (Kos). A duplicate copy of this Request is enclosed.

6. ☐ A suspension of action on the above-identified patent application is requested under 37 C.F.R. § 1.103(c) for a period of months.
7. ☐ A check in the amount of \$750.00 in payment of the fee under 37 C.F.R. § 1.17(e) is enclosed.
8. ☒ Please charge \$750.00 to Deposit Account No. 50-2543 (Kos) in payment of the fee under 37 C.F.R. § 1.17(e). A duplicate copy of this Request is enclosed.
9. ☒ The Director is hereby authorized to charge payment of any additional fees required under 37 C.F.R. § 1.17(e) in connection with this Request, or to credit any overpayment of same, to Deposit Account No. 50-2543 (Kos). A duplicate copy of this Request is enclosed.

10. ☐ Please grant a ☐ one-month, ☐ two-month, ☐ three-month, ☐ four-month, extension of time under 37 C.F.R. § 1.136(a) to the Examiner's Action of ___ in the above-identified patent application.
11. ☐ A check in the amount of \$___ in payment of the extension-of-time fee is enclosed.
12. ☒ The Director is hereby authorized to charge payment of any additional extension-of-time fees required under 37 C.F.R. § 1.16 or § 1.17 in connection with this paper, or to credit any overpayment of same, to Deposit Account No. 50-2543 (Kos). A duplicate copy of this Request is enclosed.
13. ☐ Please charge the extension-of-time fee of \$___ to Deposit Account No. 50-2543 (Kos). A duplicate copy of this Request is enclosed.

1/15/03
Date

K. Messick
Karen J. Messick (Reg. No. 46,256)
Attorney for Applicant
c/o Kos Pharmaceuticals, Inc.
1001 Brickell Bay Drive
25th Floor
Miami, Florida 33131
Tel.: (305) 523-3643